

Member Satisfaction Survey Results Basic Plans

Blue Shield of California

- Scores for member services have trended upward, but compared to 2005, the 2006 score increased from 49 to 68. Factors contributing to this improvement cited by survey respondents included shorter wait times, more consistent information received from the plan, easier to use telephone system, and better interactions between member service representatives and members.
- For 2006, scores for appropriate use of the emergency room (ER) increased compared to 2005 (from 39 to 41). Blue Shield continues its programs to identify members with potential inappropriate ER use and targets educational material to these members regarding appropriate use of urgent care instead of the ER. Blue Shield targets educational material to members with two or more ER visits within a six-month period or with ER charges less than \$500.

Kaiser Permanente

- Overall satisfaction score increased from 46 in 2005 to 75 in 2006. Kaiser attributes this improvement to various recently implemented programs including comprehensive training of all staff regarding customer service.
- For 2005 and 2006, Kaiser scored lower than the other plans in the percent of members “who had no problem finding a doctor they are happy with.” Kaiser states this is inconsistent with survey results for their entire commercial book of business. However, Kaiser will further analyze this issue.
- For 2006, scores for appropriate use of the ER increased compared to 2005 (from 44 to 51). Kaiser attributes the improvement to hiring more primary care physicians and reconfiguring physicians’ schedules to increase appointment supply in a number of departments.

Western Health Advantage (WHA)

- Scores for member services have been stable over the past several years, but compared to 2005, the 2006 score increased from 58 in 2005 to 69. Contributing to this improvement is an increase in satisfaction with problem resolution (from 56 to 60). WHA attributes performance to ongoing Quality Improvement activities in member services including process improvement for referral of calls to the claims specialist and the grievance/appeals unit.
- Scores for specialist access have been stable over the past several years, but compared to 2005, the 2006 score decreased from 82 in 2005 to 73. WHA believes that it will improve in this area because it has added more specialists to the network,

allows members to see contracted specialists outside their medical group, and provides incentives to medical groups to improve access to care.

- For 2006, scores for appropriate use of the ER increased compared to 2005 (from 36 to 44). WHA's efforts to further improve in this area include educating members via newsletters with articles on appropriate use of urgent and emergency care; calling new members within 45 days of enrollment to provide support to regarding problems understanding benefits or appropriately using services. WHA also ensures that all its medical groups have urgent care centers or extended hours clinics. WHA updates its provider list quarterly and shows urgent care centers.

PERSCare and PERS Choice

We report PERSCare and PERS Choice together because Blue Cross administers both plans using the same staff and policies.

- Scores for member services have been stable over the past several years, but compared to 2005, the 2006 scores increased for both plans. PERS Choice score increased from 42 to 59 and PERSCare increased from 48 to 68. Blue Cross attributes this improvement to initiatives such as the One Call Resolution and Call Back Program and will continue to focus ongoing efforts on problem resolution initiatives.
- For 2005, scores for appropriate use of the ER increased compared to 2005 for both plans (from 56 to 68 for PERSCare and from 51 to 63 for PERS Choice). To encourage appropriate use of urgent care, in the second quarter of 2006, Blue Cross expanded its urgent care center network in California, will actively promote this network to CalPERS members in Open Enrollment materials, and will highlight this network in a new co-branded Web site for the PPOs in the fourth quarter of 2006.